

State of Washington
Application for a Water Right Permit☐ SURFACE WATER ☒ GROUND WATER
☒ Permanent ☐ Temporary ☐ Short Term

Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO
THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.RECEIVED
JAN 21 2009
DEPARTMENT OF ECOLOGY
EASTERN REGIONAL OFFICECK # 2258
\$ 50.00

Section 1. APPLICANT

Applicant/Business Name: <u>NIGHTHAWK FARM LLC</u>	Phone No: <u>509-738-3124</u>	Other No:
Address: <u>PO BOX 1047</u>		
City: <u>KETTLE FALLS</u>	State: <u>WA</u>	Zip: <u>99141</u>
Email Address (optional): <u>lpardini@pardinidesigngroup.com</u>		

Contact Name (if different from above):	Phone No:	Other No:
Relationship to Applicant:		
Address:		
City:	State:	Zip:
Email Address (optional):		

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: DOMESTIC-MULTIPLE, DOMESTIC-SINGLEAnticipated length of time to complete your project: 5 YRS**Water Use** List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only) <input type="checkbox"/> Cubic Feet per Second (CFS) <input checked="" type="checkbox"/> Gallons per Minute (GPM)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
<u>DOMESTIC-MULTIPLE</u>	<u>3060</u>		<u>CONTINUOUS</u>
<u>STOCK WATER</u>	<u>3.5</u>		<u>"</u>
<u>IRRIGATION</u>	<u>20 300 gpm</u> <u>2-17-2009</u>		<u>SEASONAL</u>
TOTAL:			

Short Term/1Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NOIs this request for a temporary permit? ☐ YES ☒ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: ___/___/___ TO: ___/___/___

For Ecology Use	APPLICATION NO: <u>63-30573</u>	SEPA: <u>Exempt</u> Not Exempt
	Fee Paid: <u>50.00</u> <u>1-2-09</u> Check No: <u>2258</u> <u>37.78</u> <u>2-17-09</u> <u>2260</u>	ECY Coding: 001-001-WR1-0285-000011
Date Returned <u>orig. 1-9-2009</u> <u>APP</u>	By <u>KAR</u> Priority Date <u>1-2-2009</u>	By <u>KAR</u> WRIA: <u>61</u>

Section 3. POINT OF DIVERSION OR WITHDRAWAL

Complete A or B, and C below

A.) If Surface Water Source	B.) If Ground Water Source
<input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____
Source Name: _____	Well diameter & depth: <u>6"-TBD</u>
Tributary to: _____	Number of proposed points of withdrawal: <u>TBD</u>
Number of proposed diversion points: _____	Do you have an existing well? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO	If available, attach Water Well Report and pump test.
	Well Tag ID No. _____

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
<u>73633110002005</u>	<u>NW</u>	<u>NE</u>	<u>33</u>	<u>36N</u>	<u>37E</u>	<u>FERRY</u>
Lot(s)	Block(s)		Subdivision			

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:

_____ Feet (☐ North/☐ South) and _____ feet (☐ East/☐ West)

from the (☐NW ☐SW ☐NE ☐SE ☐) corner of Section _____.

Parcel No.	¼	¼	Section	Township	Range	County
Lot(s)	Block(s)		Subdivision			

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:

_____ feet (☐ North/☐ South) and _____ feet (☐ East/☐ West)

from the (☐NW ☐SW ☐NE ☐SE ☐) corner of Section _____.

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Do you own the land on which the proposed point of diversion/withdrawal is located? ☒ YES ☐ NO

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO

Provide the owner name(s), address, and phone number: _____

Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

GOV LOT 1, LYING WEST OF REPUBLIC KITTLE FALLS BRIDGE - IN CHELUM COUNTY
ROAD; GOV LOT 2, AND THE NW QUARTER OF THE NE QUARTER (NW¼ NE¼)
OF SECTION THIRTY THREE (33), TOWNSHIP THIRTY SIX (36) NORTH, RANGE THIRTY
SEVEN (37) E. W.M. EXCEPTING THEREFROM THE RIGHT OF WAY FOR THE REPUBLIC
KITTLE FALLS BRIDGE - IN CHELUM COUNTY ROAD

¼	¼	Section	Twp.	Range	County	Parcel No.
<u>NW</u>	<u>NE</u>	<u>33</u>	<u>36N</u>	<u>37E</u>	<u>FERRY</u>	<u>73633110002005</u>

Do you own all the lands on which the proposed place of use is located? ☒ YES ☐ NO.

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO

Provide owner name(s), address, and phone number: _____

Are there any other water rights or claims associated with this property or water system? ☐ YES ☒ NO

If yes, provide the water right and/or claim numbers: _____

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): WELL - COMMUNITY WATER SYSTEM (GROUP A)

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

Complete A or B, and C below

A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)
Projected number of connections to be served: <u>6</u>	Present population to be served water: _____
Type of connections: <u>HOME</u> (e.g., home, recreational cabin)	Estimate future population to be served: _____ (20 year projection)

C.) Water System Planning

Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? ☐ YES ☒ NO

If yes, date plan was approved ____/____/____ Water System Number: _____

Name of water system: _____

Are you within the service area of an existing water system? ☐ YES ☒ NO

If yes, explain why you are unable to connect to the system: _____

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = 30 ACRES *pak*

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: _____

Is the proposed project for a dairy farm? ☐ YES ☐ NO

Other Proposed Farm Uses

Describe all proposed uses: HORSES - (2)

CATTLE - (24)

GOATS - (6)

SHEEP - (10)

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Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☒ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head _____ and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: _____

Other Use

GARDEN, FIRE PREVENTION

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO

Will the water depth be 10 feet or more? ☐ YES ☒ NO

If you answered yes to any of the above questions, please describe: _____

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: _____
SEE ATTACHED MAP

Site Address: _____

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Leroy J. Parolini
Print Name UC MEMBER
(Applicant or authorized representative)

[Signature]
Signature

12/3/2008
Date

Patricia A. Farnay
Print Name UC MEMBER
(Landowner of Place of Use)

[Signature]
Signature

12/3/2008
Date

Print Name
(Landowner of Place of Use)

Signature

Date

Print Name
(Landowner of Place of Use)

Signature

Date

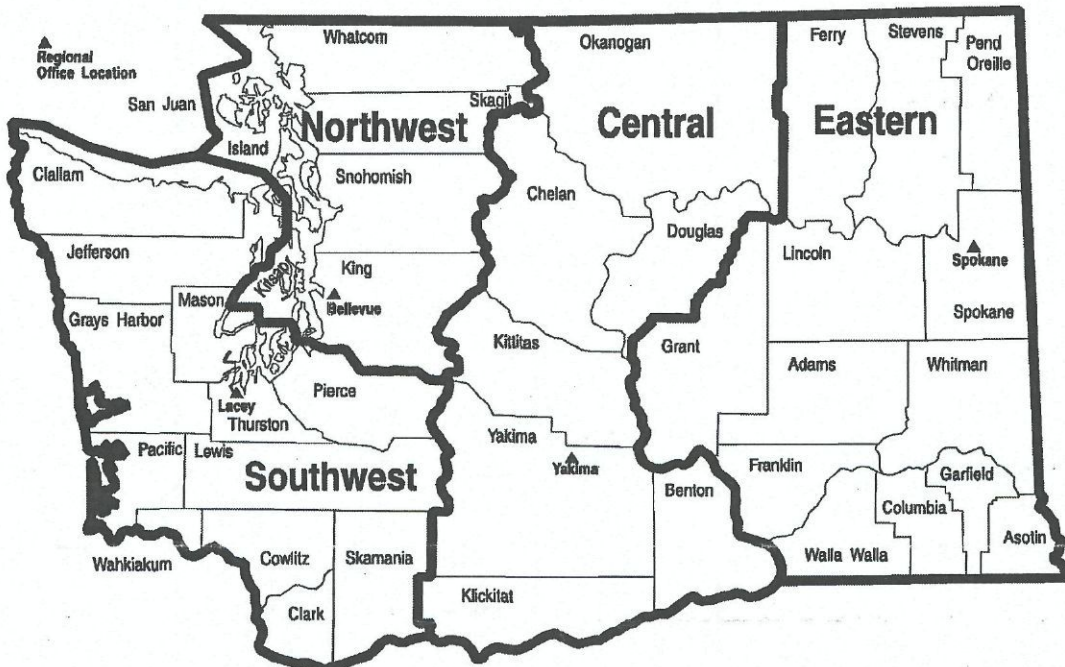
Submit your application to:

DEPARTMENT OF ECOLOGY
CASHIERING UNIT
PO BOX 47611
OLYMPIA WA 98504-7611

Please check the region in which your proposed project is located.

☐ Southwest ☐ Northwest ☐ Central ☐ Eastern

Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



Southwest Regional Office: 360-407-6300

Northwest Regional Office: 425-649-7000

Central Regional Office: 509-575-2490

Eastern Regional Office: 509-329-3400

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If you need this document in an alternate format, please call the Water Resources Program at 360-407-6600. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341



State of Washington INSTRUCTIONS for the Application for a Water Right Permit

Please read these instructions carefully. Be accurate and complete in filling out your application, as the information you provide is very important in processing your application. Be sure to attach your fees, maps, and any additional information related to the water uses you are proposing.

If you need assistance, please contact the regional office in which your project will be located. A map of the Ecology regions is on the back page of the application. If your answers to any questions are longer than the space provided, you may attach additional sheets as necessary.

Check Boxes

Check the appropriate box for Surface or Ground Water.

Check the appropriate box for Permanent, Temporary, or Short Term use (duration of 4 months or less).

Application Fee

- A minimum fee of \$50.00 is required for each new application for a water right permit.
- No fees are required for applications to be processed under a Cost Reimbursement contract.
- No fees are required for Emergency Drought Applications (only when a drought is declared).

If additional fees are required, Ecology will send you a letter requesting those fees. If you are unsure of the appropriate fee amount, contact your regional office for more information, or visit our website:

http://www.ecy.wa.gov/programs/wr/rights/wr_fees.html.

**Please make checks or money orders payable to the "Department of Ecology." Cash cannot be accepted.
ALL FEES ARE NONREFUNDABLE.**

Section 1. APPLICANT

Enter the name of the person, organization, or water system for which the water right permit is requested. For instance, if the permit is required for a community water system, enter the name of the system (e.g. Green Acres Water Works). Enter a mailing address, including zip, daytime telephone, an alternate or cell phone number, and an Email address (if you have one).

Provide the name of a contact person (if different from above) to call in case we have questions about the application or proposed project. Describe the relationship of the contact person to the applicant, e.g. "consultant," "water systems engineer," "realtor," "chair of community well organization," etc.

Section 2. STATEMENT OF INTENT

Provide a brief description of the purpose of your proposed project and the anticipated length of time to complete the project.

Water Use

List the purpose(s) for which you are proposing to use the water (**see examples of purposes below**). Check the appropriate box to indicate if the rate you have provided is measured in cubic feet per second or gallons per minute. For each purpose provide the maximum rate at which water is proposed to be taken from the water source. If known, provide the maximum quantity to be used for the purposes in acre-feet per year. Provide period of use (months) in which the water will be used for each purpose. Total the water needs for each purpose of use and write the total within the space provided.

Short Term/Temporary Water Use

If this application is being submitted for a short term (less than four months – see Policy 1037) or temporary water use (see Policy 1035), check the appropriate box and indicate the dates the water will be needed.

For more information on Water Resources Program Policies, contact your regional office or visit our website:

http://www.ecy.wa.gov/programs/wr/rules/pol_pro.html#wradminpolicy.

Examples of purpose(s)

Be sure that you include ALL uses that you propose, not just the major use of water. Some examples are:

- | | |
|---------------------|---------------------------------------|
| • Dairy | • Hydropower |
| • Domestic-Multiple | • Industrial/Manufacturing/Commercial |
| • Domestic-Single | • Irrigation |
| • Dust Control | • Mining |
| • Fish Propagation | • Municipal |
| • Frost Protection | • Stockwater |
| • Heat Exchange | • Other (describe) |